ISSUE SLIP STAPLE AREA (for additional cross references)

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION			
O.I.P.E. CLASSIFIER			
FORMALITY REVIEW			
RESPONSE FORMALITY REVIEW			5/15/00

INDEX OF CLAIMS

✔ .... Rejected   N .... Non-elected
= .... Allowed   I .... Interference
− (Through numeral)... Canceled   A .... Appeal
÷ .... Restricted   O .... Objected

Claim		Date							Claim		Date							Claim		Date						
Final	Original								Final	Original								Final	Original							
	1									51									101							
	2									52									102							
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	50									100									150							

If more than 150 claims or 10 actions
staple additional sheet here

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